Can Nigeria achieve ODF with Business as Usual?

22nd Nov 2016

Kannan Nadar, Chief of WASH, UNICEF Nigeria

At the National CLTS Conference and Launch of ODF Roadmap from Nigeria
• Where are we now?
• What are we doing?
• The case of Polio Eradication efforts
• What do we need to do?
Sanitation Situation in Nigeria

> 44 Million Open Defecators

Disparities

N-E: 37% of IDPs in camps with WASH access below standards; Only 23% and 9% of IDPs in host communities have access to water & sanitation respectively; 75% of WASH infrastructure destroyed in affected LGAs

<table>
<thead>
<tr>
<th></th>
<th>Water, Sanitation</th>
<th>Open Defecation</th>
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<tbody>
<tr>
<td>Urban</td>
<td>2.5</td>
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<td>Rural</td>
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Girls/ women disproportionally affected by lack of water & sanitation

>40% access to sanitation
Sanitation Practices in Nigeria

Over 70% of Nigerians lack access to improved sanitation

<table>
<thead>
<tr>
<th>Unimproved Sanitation</th>
<th>Improved Sanitation</th>
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<tbody>
<tr>
<td>Open Defecation</td>
<td>Hygienic separation of human excreta from human contact (i.e. flush or pour-flush toilets)</td>
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<td>Shared Facilities</td>
<td>50.46 million people</td>
</tr>
<tr>
<td>Other Unimproved Sanitation</td>
<td>29% of the population</td>
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- Human feces disposed in open areas: > 44 million people (25% of the population)
- Facilities shared between two or more households: 42 million people (24% of the population)
- No hygienic separation of human excreta from human contact (i.e. pit latrines): 38 million people (22% of the population)

124 million people lack access to improved sanitation – a significant potential for financial sector and private sector institutions to tap into this market.

Source: WHO Joint Monitoring Programme, 2015 data
What are the targets for ODF communities?

Sanitation – HH targets (2016-2025)

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<th>Year</th>
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<tr>
<td>2016-2018</td>
<td>A total of 3,000,000 HH toilets during the period (at an average of 1,000,000 per HH toilets per year)</td>
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<td>2019-2025</td>
<td>A total of 20,600,000 HH toilets during the period (at an average of 2,942,857 per HH toilets per year)</td>
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9% (16 million) of the 2015 population has gained access to Sanitation since 1990. On average: 160,000 household toilets/year

15 times the effort needed...

What are we doing?
What is Nigeria doing to Scale-up SANITATION?

**STRONG INSTITUTIONS**
- LGAs with WASH Dept.
- Trained Human Resources
- Operational Budget
- Functional WASHCOMs

**PARTNERSHIPS**
- Build on Existing Leadership and Momentum
- Grassroots Partnerships
- Strategic Partnerships *(EHORECON, NEWSAN, SMEDAN, RBDAs)*
- Inter-sectoral Partnerships

**QUALITY ASSURANCE**
- Quality of CLTS Facilitation
- Monitoring and Reporting *(CLTS Database)*
- NTGS Validation
- Independent Verification

**LEARNING**
- Knowledge Management
- Innovations
- Sanitation Marketing
- Operational Research

**LGA-WIDE APPROACH TO TOTAL SANITATION**
CLTS interventions scaled-up through LGA-wide approach

Progress in ODF Communities

30 times increase between 2010 and 2016
The progress represents just less than 10% of the need!
Over 60% of the ODF certified communities maintain their ODF status beyond one year!
The case of Polio Eradication
Nigeria celebrated a full year and a half without a new case of wild poliovirus. As at February 2012, only 16% of LGAs in high-risk states had achieved target immunity coverage (>80%) of all children under the age of five. By September 2015, a six-fold increase, 97 percent of LGAs in high-risk states had achieved the immunization target. The success of Nigeria’s federal and state governments is all the more impressive given the climate of violence that peaked with the 2013 murder of 13 vaccinators by insurgents in Kano and Borno states.

How did this happen?
• Nigeria created a **presidential task force** to lead the country’s response to the eradication of polio.

• The **Ministry of Health created EOCs** to focus on the highest-priority interventions, **to improve coordination, and to manage the program’s overall performance closely**.

• **EOCs are centralized command-and-control units** responsible for disaster preparation and management. Other countries and cities have also used them to **respond to emergencies**.

• Nigeria’s National Polio EOC was established in the capital, Abuja, in October 2012.
What can EOCs do?

Emergency operations centers have five primary components.

1. **War-room approach**
   - Dedicated and co-located physical space or room
   - Layout facilitates new way of working, discovering, learning, and experimentation
   - Extensive use of data, tools, and templates

2. **Dedicated cross-functional talent**
   - Best possible 20–25 leaders and high-potential talent as full-time members
   - Cross-functional team
   - Facilitators to provoke, challenge, and help shape ideas into actions

3. **Fast-paced analytics and frequent synthesis**
   - Iterative process to address difficult issues, promote intensive idea generation, and accelerate solution development
   - Rapid capability building with forced learning curve

4. **Rapid decision making and syndication**
   - Protected authority from Minister (with weekly visits)
   - Frequent, extensive, early syndication to get buy-in
   - Bring stakeholders on board via field visits, interviews, focus groups, etc.

5. **Intensive program management**
   - Clear targets, with debottlenecking process
   - Full visibility on progress and outcomes with rigorous tracking and regular monitoring (eg, daily, weekly, monthly reports)

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do we need a War Room Approach to Eradicate Open Defecation From Nigeria?
What do we need to do?
Way Forward for Nigeria

• Create and notify ODF Nigeria EOC at FMWR, Similarly notify and establish state EOCs

• **National EOC**: Not Business as usual through part time staff. Rather full time and dedicated staff to cover all aspects of program - Capacity Building, Supply Chain and Marketing, Resource Mobilisation, Communication, M&E

• Fast Paced Analytics and Frequent Synthesis - WASHIMS Exists!

• War like and immediate corrective response

• Regular Review with States on State ODF Roadmap Implementation
The woods are lovely, dark and deep, The woods are lovely, dark and deep, The woods are lovely, dark and deep, The woods are lovely, dark and deep, But I have promises to keep, But I have promises to keep, But I have promises to keep, But I have promises to keep, And miles to go before I sleep, And miles to go before I sleep, And miles to go before I sleep, And miles to go before I sleep……

Information, Education and Communication

Sanitation Financing:
- MFIs / Pool Fund, WASHCOM

Adashes

ODF Road Map
- (national/state/LGA)

Influencers
- (CLTS Ambassadors)

PEWASH

Mobilize allies
- (Barefooted Consultants, etc)

3rd Party certification

CLTS, Resource Pool of Practitioners

Appropriate Technology Development

Sanitation Financing:
- MFIs / Pool Fund, WASHCOM Adashes

Sanitation Marketing:
- Entrepreneurs, masons, suppliers

Pillar 1
- Enabling Environment

Pillar 2
- Demand Creation

Pillar 3
- Supply chain

3rd Party certification

CLTS, Resource Pool of Practitioners

Appropriate Technology Development

Sanitation Marketing:
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Investment

Innovation

Information, Education and Communication

Institutions

The 3 Pillars to stand on!!

WASH Information Management System/ Sector Learning
Open Defecation Free Nigeria is possible !!

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